# LAKE COUNTY SHERIFF'S MERIT COMMISSION SUPPLEMENTAL APPLICATION PERSONAL DATA

First name	Middle I	Last name
ADDRESS:		
(House number	& street) (Apt. no.)	(City/State/Zip code)
RE YOU CURRENTLY 21 YEARS OR	OLDER  YES  NO	
OME TELEPHONE:	CELL PHONE:	BUSINESS TELEPHONE:
-MAIL ADDRESS:	How long have you	RESIDED AT YOUR CURRENT ADDRESS?
O YOU CURRENTLY HAVE A VALID DI	RIVER'S LICENSE?   YES   NO DRIVER'S LICENSE	CENSE NUMBER AND STATE ISSUED BY:
LLINOIS LAW REQUIRES THAT LAKE (	COUNTY DEPUTY SHERIFFS BE U.S. CITIZENS. AR	E YOU CURRENTLY A U.S. CITIZEN? I YES INO
	CURRENT LAW ENFORCEMEN	NT EXPERIENCE
CURRENT AGENCY	N	
FROM:	Name:	
то:	Address:	DESCRIBE YOUR DUTIES:
		——————————————————————————————————————
STARTING MONTHLY SALARY \$	,	
	REASON FOR WANTING TRANSFER:	
FINAL MONTHLY SALARY \$	REASON FOR WANTING TRANSFER:	
FINAL MONTHLY SALARY \$	REASON FOR WANTING TRANSFER:	Supervisor's Name:
<u> </u>		
<u>u </u>	REASON FOR WANTING TRANSFER:	Supervisor's Name:
FINAL MONTHLY SALARY \$  HRS. WORKED PER WEEK:		Supervisor's Name:
HRS. WORKED PER WEEK:		Supervisor's Name:
HRS. WORKED PER WEEK:		Supervisor's Name:

CURRENT ASSIGNMENT:		
PREVIOUS ASSIGNMENTS AND DATES OF SERVI	DE:	·
PROMOTIONS RECEIVED AND DATES ATTAINED:		
AWARDS/COMMENDATIONS:	·	
		·
	PRIOR EMPLOYMENT EXPERIENCE	
	OSITION, PLEASE ACCOUNT FOR ALL EMPLOYMENT WITH WIPLETE THIS SECTION EVEN IF A SEPARATE RESUME IS ATTACH	
1. EMPLOYER NAME:	Address:	
DATE OF EMPLOYMENT: FROMTO	STARTING SALARY: .	ENDING SALARY:
JOB TITLE:	SUPERVISOR'S NAME/TITLE: _	
DESCRIBE DUTIES AND HOURS:		
REASON FOR LEAVING:		
2. EMPLOYER NAME:	Address:	
DATE OF EMPLOYMENT: FROM TO	: STARTING SALARY:	ENDING SALARY:
ЈОВ ТПLE:	SUPERVISOR'S NAME/TITLE: _	
•		
REASON FOR LEAVING:		
3. EMPLOYER NAME:	Address:	
DATE OF EMPLOYMENT: FROM TO	: STARTING SALARY:	ENDING SALARY:
ЈОВ ТПLE:	SUPERVISOR'S NAME/TITLE:	

			POLICE TRAINING			
HOW MANY HOURS OF RECRUIT I	POLICE TRAIN	ING HAVE YOU I	HAD?			
Name of Academy Attended:			Date	E OF GRADUATION:		
LIST ALL OTHER POLICE TRAINING						
NAME AND LOCATION OF SCHOOL	Dates A	ATTENDED	TITLE OF COURSE	CLASSROOM HOURS	Instructor	ACADEMIC CREDIT HOUF EARNED
	FROM	ТО				LAMED
				•		
			MILITARY SERVICE			
Have you ever served on activ			ICES OF THE UNITED STATES?			
			ICES OF THE UNITED STATES?			
Have you ever served on active If yes, give branch of Service Induction Date:	:		ICES OF THE UNITED STATES?  SERIAL NUMBE	R:		
IF YES, GIVE BRANCH OF SERVICE	:		ICES OF THE UNITED STATES?  SERIAL NUMBE  RELEASE DAT	FE:		
IF YES, GIVE BRANCH OF SERVICE INDUCTION DATE:  ARE YOU A MEMBER OF AN ACTIV	: /E RESERVE C	DR NATIONAL G	ICES OF THE UNITED STATES?  SERIAL NUMBE RELEASE DAT  UARD UNIT?  YES  NO	TR: TE: O	· · · · · · · · · · · · · · · · · · ·	
IF YES, GIVE BRANCH OF SERVICE	/E RESERVE C	DR NATIONAL G	ICES OF THE UNITED STATES?  SERIAL NUMBE  RELEASE DAT  UARD UNIT?  YES  No	er: Te: O	· · · · · · · · · · · · · · · · · · ·	
IF YES, GIVE BRANCH OF SERVICE INDUCTION DATE:  ARE YOU A MEMBER OF AN ACTIV IF YES, GIVE DETAILS:  HAVE YOU EVER RECEIVED A D	E RESERVE C	OR NATIONAL G	ICES OF THE UNITED STATES?  SERIAL NUMBE RELEASE DAT  UARD UNIT? YES NO	Te:		
IF YES, GIVE BRANCH OF SERVICE INDUCTION DATE: ARE YOU A MEMBER OF AN ACTIV IF YES, GIVE DETAILS:	E RESERVE C	OR NATIONAL G	ICES OF THE UNITED STATES?  SERIAL NUMBE RELEASE DAT  UARD UNIT? YES NO	Te:		
IF YES, GIVE BRANCH OF SERVICE INDUCTION DATE:  ARE YOU A MEMBER OF AN ACTIV IF YES, GIVE DETAILS:  HAVE YOU EVER RECEIVED A D	E RESERVE C	OR NATIONAL G	ICES OF THE UNITED STATES?  SERIAL NUMBE RELEASE DAT  UARD UNIT? YES NO	TE:O  YES □ NO		

REFERENCES	S
GIVE THREE REFERENCES (NOT RELATIVES, BUT RESPONSIBLE ADULTS OF REPUTABLE PAST FIVE YEARS.	STANDING IN THEIR COMMUNITY) WHO HAVE KNOW YOU WELL IN THE
NAME	ADDRESS
MISCELLANEO	US
HOW DID YOU LEARN OF THIS JOB OPENING?	

# LAKE COUNTY SHERIFF'S OFFICE MERT COMMISSION APPLICATION

NAME				
(Last) HAVE YOU EVER USED OR GONE BY ANOTHER NAME?	□ YES □ NO	FYES, PLEASELIST.	(First)	(Middle)
Address:				
(House number & street)	(Fig.		(Apt. no.)	(City/State/Zipcode)
WILL YOU BE 21 YEARS OF AGE OR OLDER ON: (mm)	(60)	OYES ONO	SOCIAL SECURITY#:	
DO YOU CURRENTLY HAVE A VALID DRIVER'S LICENSE? I YES	§ 0	DRIVER'S LICENSE NUMBER AND STATE ISSUED BY:	E ISSUED BY:	е <mark>л — түйтө боларган айтуустан өрүүн андандардардардардан айтуу айтуу айтуу айтуу айтуу айтуу айтуу айтуу айтуу</mark>
ILINOIS LAW REQUIRES THAT LAKE COUNTY DEPUTY SHERIFFS BE US CITZENS.		ARE YOU CURRENTLY A US CITIZEN? 🔲 YES 🗀 NO IFNOT, EXPLAIN	] YES [] NO IFNOT, EXPLAIN	And the second s
INSTRUCTIONS:			-	
READ EVERY QUESTION CAREFULLY AND ANSWER EACH QUESTION ACCURATELY. AN APPLICANT MAY BE DISQUALIFIED FROM FURTHER PROCESSING IF HE/SHE INTENTIONALLY MAKES A FALSE STATEMENT.	ION ACCURATELY. AN APF	LICANT MAY BE DISQUALIFIED FRO	M FURTHER PROCESSING IF HE/SI	HE INTENTIONALLY MAKES A FALSE
ALL ENTRIES, EXCEPT SIGNATURE, MUST BE PRINTED LEGIBILY WITH A PEN	WITH A PEN.			
IF SPACE PROVIDED IS NOT SUFFICIENT FOR COMPLETE ANSWERS, USE ADDITIONAL SHEETS OF PAPER, INCLUDE YOUR NAME AND SOCIAL SECURITY NUMBER ON THE TOP AND BE SURE TO NUMBER. ANSWERS TO CORRESPOND WITH QUESTIONS.	rs, use additional shee	TS OF PAPER, INCLUDE YOUR NAW	E AND SOCIAL SECURITY NUMBER	ON THE TOP AND BE SURE TO NUMBER
1. HOME TELEPHONE:	2. CELL PHONE:		3. BUSINESS TELEPHONE.	
4, E-MAIL ADDRESS:	5.	5. HOW LONG HAVE YOU RESIDED AT YOUR CURRENT ADDRESS?	YOUR CURRENT ADDRESS?	
6. LIST YOUR RESIDENCE FOR THE PAST TEN YEARS, EXCLUDING YOUR CURRENT ADDRESS: (DO NOT USE RURAL ROUTE NUMBERS. GIVE MONTH AND YEAR.)	NG YOUR CURRENT ADDRE	:SS: (DO NOT USE RURAL ROUTE N	UMBERS, GIVE MONTH AND YEAR.	
PROM TO ADDRESS		CITY		STATE
		Management of the state of the		
7. HAVE YOU EVER BEEN CONVICTED OF, PLEAD GUILTY TO, OR RECEIVED SUPERVISION FOR A MISDEMEANOR OR FELCNY (DO NOT INCLUDE OFFENSES THAT HAVE BEEN ORDERED, EXPUNGED, SEALED OR IMPOUNDED). CI YES CI NO	RECEIVED SUPERVISION I	FOR A MISDEMEANOR OR FELCONY	DO NOT INCLUDE OFFENSES THA	THAVE BEEN ORDERED, EXPUNGED, SEALED

Revised 6/2007

Revised 6/2007

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		<b>B</b>	EXAMINATION RECORD	
DATE	EXAMINATION	SCORE	ADMINISTRATOR	COMMENTS
	PHYSICAL AGILITY TEST			
	WRITTEN EXAM			
	ORAL INTERVIEW			
			BACKGROUND CHECK	
DATE	AGENCY	CLEAR	RECORD	COMMENTS
	M.V.R.			
	LOCAL			
	l.B.I.			
:	F.B.I.			
		3	EXAMINATION RECORD	
DATE	REFERENCE	снескер ву	ADMINISTRATOR	COMMENTS
				The state of the s
		•		
		FOR MEF	FOR MERIT COMMISSION USE ONLY	
		REVIEWED BY:	DATE:	
		ACCEPTED: ☐ ACCEPTED PENDING:	PENDING:	
		REJECTED FOR EDUCATION:	REJECTED FOR EXPERIENCE:	NCE:
		REJECTED FOR:		
		DATED CERTIFIED:		
		REMARKS:		



OFFICE OF THE SHERIFF

MARK C. CURRAN, JR.
SHERIFF
CHARLES E. FAGAN
UNDERSHERIFF

Lake County, Illinois

25 S. Martin Luther King, Jr. Ave. Waukegan, Illinois 60085 Phone: (847) 377-4000

Fax: (847) 360-5796

### EMERGENCY DIAL 911

# A TRADITION OF EXCELLENCE

**DIVISIONS** 

Civil Process (847) 377-4400

Communications (847) 549-5200

Court Security (847) 377-4911

Criminal Investigations (847) 377-4250

Emergency Management Agency (847) 377-7100

Highway Patrol (847) 377-7020

Tail

(847) 377-4112 Marine Unit

(847) 587-4471 Records

(847) 377-4200

Training/ Community

Service (847) 377-4350

Warrants (847) 377-4300

Work Release (847) 377-4450 Welcome to an exciting employment opportunity. The Lake County Sheriff's Office offers a real opportunity to step up and stand out as a Deputy Sheriff. Step up to a highly rewarding and challenging career where you are able to stand out with competitive pay and excellent

promotional advancements.

As a law enforcement organization, we are committed to be an organization dedicated to the concepts of personal excellence, continuous improvement, integrity, teamwork and quality service to the people who live and work in Lake County.

We take pride in our abilities and accomplishments and profess an open partnership to each and every person we serve.

Come join us!

Mark C. Curran, Jr.

Sheriff

\*The Lake County Sheriff's Office is an Equal Opportunity Employer



# OFFICE OF THE SHERIFF

MARK C. CURRAN, JR. **SHERIFF** CHARLES E. FAGAN UNDERSHERIFF

Lake County, Illinois

25 S. Martin Luther King, Jr. Ave. Waukegan, Illinois 60085

Phone: (847) 377-4000 Fax: (847) 360-5796

### DEPUTY SHERIFF

**EMERGENCY DIAL 911** 

DIVISIONS

Civil Process (847) 377-4400

Communications (847) 549-5200

Court Security (847) 377-4911

Criminal Investigations (847) 377-4250

Emergency Management Agency

(847) 377-7100

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Marine Unit (847) 587-4471

Records (847) 377-4200

Training/ Community Service (847) 377-4350

Warrants (847) 377-4300

Work Release (847) 377-4450

Salary **Starting \$25.70** 

**Employment Benefits** 

Vacation - 10 days/1-5 years; 15 days/6-12 years; 20 days/13+ years of service

Sick Leave - Twelve days per year Personal Day - Three days per year

Holidays - Twelve paid holidays per year, plus Election Day when applicable Medical, Hospital and Dental Insurance – Provided through the County of Lake's Preferred Provider Organization (PPO) or a Health Maintenance Organization (HMO).

Life Insurance – Provided at no expense to eligible employees. Plus additional optional and voluntary life at group rates.

Retirement, Death and Disability Coverage - Membership in the Sheriff's Law

Enforcement Police (SLEP) Pension Fund and Social Security.

**Deferred Compensation Program** – Optional benefit to defer a portion of salary

and taxes for future supplemental retirement.

Credit Union - Offers low interest loans and savings through payroll deduction. Direct Deposit - Net pay may be directed to a designated account at an approved

financial institution.

Tuition Reimbursement - Covers skill development and career advancement

related education.

Employee Assistance Program (EAP) - Confidential assistance with personal and interpersonal problems.

FlexOne Spending Account - Pre-tax deferred money for extra medical or dependent care coverage.

Squad Assignment Program - Some divisions (Highway Patrol, Criminal Investigations, Warrants and Civil Process) provide take home squads (Visibility Program) to be used for official business (to and from duty, court, inquests, assignments and special details), at the Sheriff's discretion.

Special Duty Pay - Extra voluntary details paid at a fixed rate.



20 South County Street - 2nd Floor Waukegan, Illinois 60085-5534 Phone 847 360 6638 Fax 847 625 7187

# DEPUTY SHERIFF LAW ENFORCEMENT TRANSFER PROGRAM

The Lake County Sheriff's Office Merit Commission is continually taking applications for qualified law enforcement transfer candidates. The following section in Standards for Appointment, Merit Commission Rules and Regulations apply to potential transfer candidates.

## 6.07 TRANSFER GUIDELINES

Under certain limited circumstances the Merit Commission's 60 hours of college credit or an Associate Degree requirement, the physical agility test and the written test may be waived for individuals who:

- a. Are currently employed as a deputy sheriff or municipal police officer
- b. Are in good standing in their department
- c. Have two years of police experience
- d. Have successfully completed Illinois Basic Police Officer Training or successfully completed Basic Police Officer Training Program which can be transferred and accepted by the Illinois State Training Board
- e. Complete a Supplemental Transfer Application in addition to the Merit Commission's regular application; and

All other standards for appointment delineated in 6.01 of the Merit Commission Rules shall apply.

### 6.01 STANDARDS FOR APPOINTMENT

Applicants for appointment as deputy sheriff, in addition to the provisions of State Statute, must: (Amended 02/24/93)

- a. Deputy Sheriff
  Be no younger than twenty-one (21) years of age at the time of their certification.
  (Amended 05/17/95)
- b. (Deleted April 21, 1986)
- Have 60 hours of college credit or an Associates Degree or have served a minimum of two years active duty and received an honorable discharge from any branch of the United States Military. An individual currently on active duty in the United States Military who is within six months of discharge and otherwise qualified may apply for appointment, provided however, that such an individual shall not be appointed if that individual receives other than an honorable discharge upon separation from the military.

  (Amended 09/12/96) (Amended 04/16/97)

# DEPUTY SHERIFF LAW ENFORCEMENT TRANSFER PROGRAM (continued)

- d. (Deleted September 12, 1996)
- e. Meet such standards of intelligence, reasoning and judgement as the Commission may from time-to-time prescribe.
- f. (Deleted January 13, 1992)
- g. Pass such valid screening examinations as the Commission may from time-to-time prescribe.
- h. Possess a valid driver's license. (Amended 05/20/92)
- Be acceptable to the Commission following investigation made by the Commission of background reputation and character. The Commission, at it's will, may hire an investigator and this shall be provided for in the annual budget.
- j. Be acceptable to the Commission on valid oral interview.

### TRANSFER PROCESS

Included in the transfer process may be the following:

- Completed application with all necessary attachments and signatures
- Background investigation (to include contacting current and former employers)
- Polygraph and psychological examinations
- Oral interviews
- Successful completion of a physical examination upon offer of employment
- Successful completion of the Field Training Program, and any additional training as determined by the Sheriff, within the prescribed probationary period

Interested persons may apply by downloading the application and forwarding it to the Lake County Sheriff's Office Merit Commission, 20 South County Street, 2<sup>nd</sup> Floor, Waukegan, Illinois 60085-5534. If you have any questions please feel free to contact the office at 847/377-2459.

# DISCLOSURE, AUTHORIZATION AND RELEASE OF MEDICAL HEALTH INFORMATION

I understand that, in connection with my application for certification to seek employment with the Lake County Sheriff, the Lake County Sheriff's Merit Commission will request an outside agency or individual to conduct a polygraph examination and psychological evaluation of me. I hereby authorize any individual or agency designated by the Lake County Sheriff's Merit Commission to conduct these examinations and to release the information to the Lake County Sheriff's Merit Commission, including the examination test, evaluation data, written report and tester's and evaluator's notes. I understand and acknowledge that this authorization constitutes a waiver of any confidentiality and protection.

The intent of this authorization is to give my consent for full and complete disclosure to the Lake County Sheriff's Merit Commission to provide access to the background of my personal and professional life to determine my suitability for certification to be considered for employment with the Lake County Sheriff. I further authorize the Lake County Sheriff's Merit Commission to release all information, including polygraph examination results and mental health information, to authorized agents of the Lake County Sheriff for the limited purpose of employment considerations.

I unconditionally release and hold harmless any individual, corporation or private or public entity from any and all causes of action that might arise from furnishing to the Lake County Sheriff's Merit Commission and its agency and the Lake County Sheriff information that they may request pursuant to this release.

I understand that my signature below and the information I have provided establishes no obligation on the part of the Lake County Sheriff's Merit Commission or the Lake County Sheriff to certify or to employ me. There has been no implied or expressed guarantee that my completion of this application will necessarily result in my certification or employment. I authorize the Lake County Sheriff's Merit Commission and the Lake County to make any investigation and receive information relevant to my suitability for certification or employment. I agree that if any misrepresentation has been made by me or the results of such investigations are not satisfactory in the judgment of the Lake County Sheriff's Merit Commission or the Lake County Sheriff, any certification offer of employment may be withdrawn without any obligation or liability to me.

This authorization and release, in original, faxed or photocopied form shall be valid for this and any future reports and updates that may be requested by the Lake County Sheriff's Merit Commission. I agree to pay any and all charges for fees concerning this request and can be billed for such charges at the address listed below on this form.

Date:	
	Applicant's Signature
	Applicant's Name Printed
	Applicant's Address
	Birth date
	Telephone Number

# RELEASE AGREEMENT

enforcement agencies that up	oon being formally less member agencies.	f's Merit Commission and the participating law hired, I will be removed from any and all other. This removal from consideration shall be for a n I was placed.
I further authorize the which I have applied of this s	e department by whi situation.	ch I am hired to notify any other department to
•		
		Applicant's Signature
	•	Applicant's Printed Name
	est.	Applicant's Address
		Date
		Witness

# DISCLOSURE AND AUTHORIZATION TO PROCURE CONSUMER CREDIT REPORT AND CONDUCT BACKGROUND INVESTIGATION

I understand that, as a condition of my condition for certification as an applicant for the Lake County Sheriff, or as a condition of my employment with the Lake County Sheriff, that the Lake County Sheriff's Merit Commission and Lake County Sheriff or his designee may obtain a Consumer Credit Report and/or Investigative Consumer Credit Report and/or conduct a background investigation where information may be obtained regarding, but not limited to, my creditworthiness or similar characteristics, employment and education verifications, social security verification, criminal and civil history including court records and criminal records, school records, polygraph examination records, internal affairs and discipline records, personal interviews, Department of Motor Vehicle records, military records, employment records of past and current employers, any other public records and any other information bearing on my qualifications, credit standing, credit capacity, character, general reputation, personal characteristics, mode of living and trustworthiness.

I hereby give my consent and authorize the Lake County Sheriff's Merit Commission and the Lake County Sheriff or his designee to obtain a consumer credit report and/or investigative consumer credit report and to otherwise conduct a background investigation. I understand that, pursuant to the federal Fair Credit Reporting Act, the Lake County Merit Commission or the Lake County Sheriff will provide me with a copy of any consumer credit report obtained from a consumer credit reporting agency if the information contained in such report is, in any way, to be used in making a decision regarding my fitness for certification and/or employment with the Lake County Sheriff. I further understand that such report will be made available to me prior to any such decision being made, along with the name and address of the reporting agency that produced the report and a written description of my rights under the Fair Credit Reporting Act. I further understand that I may have a right to request additional disclosures regarding the nature and scope of the investigation.

I hereby authorize, without reservation, all persons, corporations, schools, former or current employers, public entities or elected officials to furnish the Lake County Sheriff's Merit Commission, the Lake County Sheriff or his designee and any consumer credit reporting agency any and all information about me. I unconditionally release from all liability all persons, corporations, schools, former or current employers, public entities or elected officials supplying such information. I further agree to indemnify the Lake County Merit Commission and the Lake County Sheriff or his designee against any liability, which may result from making such requests. I further authorize the Lake County Sheriff's Merit Commission to release all information, including consumer credit reports, to the Lake County Sheriff and his designee for employment purposes. I understand and agree that this release shall remain in effect for the length of my employment.

I understand that my signature below and the information I have provided establishes no obligation on the part of the Lake County Sheriff's Merit Commission or the Lake County Sheriff to certify me or to otherwise employ me. I agree that there has been no implied or express guarantee that my completion of this application or the signing of this disclosure and authorization will result in my certification and/or employment. I authorize the Lake County Sheriff's Merit Commission and/or the Lake County Sheriff or his designee to conduct any investigation and to receive any information that they deem relevant for determining my suitability and qualifications for certification and/or employment.

I hereby certify that to the best of my knowledge, all information that I have provided the Lake County Sheriff's Merit Commission, including but not limited to all information contained in my application form and resume is true, accurate and complete. I understand that if, subsequent to certification, any such information is found to be false, incomplete or inaccurate, that my certification will be revoked and if applicable, my employment may be terminated.

This disclosure and authorization, in original, faxed or photocopied form shall be valid for this and any future reports and information that may be requested by the Lake County Sheriff's Merit Commission or the Lake County Sheriff or his designee.

Date:	
	Applicant's Signature
	Applicant's Name Printed
	Applicant's Address
	Birth Date
	Telephone Number

# **EQUAL OPPORTUNITY CERTIFIERS**

Nam	e:	· .	Social Security	#:	
Addı	ress:				
	(number & street)	(city)	(state)	(zip)	
Tele	phone # :	D	ate:		<u></u>
Qual	ified applicants are considered for	certification and	l are treated du	ing the certification	n and
are t	reated during the certification proc	ess without rega	rd to race, colo	r, religion, national	origin
citize	enship, age, sex, marital status, and	cestry, or sexual	orientation.	•	
Sole	ly to help us with record keeping,	we request that y	ou complete th	is data information	form.
(This	s information <u>will not</u> be used in co	onsideration for	your certification	on.)	
Pleas	se check the appropriate boxes to i	ndicate your rac	e and sex.		
	White (Caucasian)	SE	EX:		
	Black		<b>l</b> Male		
	Spanish-surnamed American		] Female		
<b>□</b> .	Oriental American	·	•		
	Native American (American In	dian)			
	Other (Specify)			Revised 4-28-05	

# WAIVER

<ol> <li>I HAVE READ AND ANSWERED EACH AND EVERY APPLICABLE QUESTION HEREIN, AND DO SOLEMNLY SWEAR THAT EACH AND EVERY ANSWER IS FULL AND CORRECT IN EVERY RESPECT.</li> <li>I WILL SUBMIT TO FINGERPRINTING AND PHOTOGRAPHING, AS REQUIRED.</li> <li>I AGREE TO SUBMIT TO A POLYGRAPH AND/OR PSYCHOLOGICAL EXAMINATION.</li> <li>I AGREE TO SUBMIT ANY AND ALL EDUCATION AND POLICE TRAINING INFORMATION INCLUDING TRANSCRIPTS AND COURSE CERTIFICATES.</li> <li>I AUTHORIZE AND EMPOWER THE LAKE COUNTY SHERIFF'S MERIT COMMISSION, ANY CONSUMER REPORTING AGENCY OR OTHER OUTSIDE SERVICE COMPANY ENGAGED BY THE MERIT COMMISSION FOR THIS PURPOSE, NOW OR SUBSEQUENTLY, TO OBTAIN, PREPARE, USE AND FURNISH INFORMATION CONCERNING MY CURRENT PERSONAL CHARACTERISTICS AND MODE OF LIVING, THROUGH CORRESPONDENCE OR PERSONÄL INTERVIEWS WITH NEIGHBORS, FRIENDS, ASSOCIATES OR OTHERS WITH WHOM I AM ACQUAINTED.</li> </ol>
<ol> <li>I AGREE TO SUBMIT TO A POLYGRAPH AND/OR PSYCHOLOGICAL EXAMINATION.</li> <li>I AGREE TO SUBMIT ANY AND ALL EDUCATION AND POLICE TRAINING INFORMATION INCLUDING TRANSCRIPTS AND COURSE CERTIFICATES.</li> <li>I AUTHORIZE AND EMPOWER THE LAKE COUNTY SHERIFF'S MERIT COMMISSION, ANY CONSUMER REPORTING AGENCY OR OTHER OUTSIDE SERVICE COMPANY ENGAGED BY THE MERIT COMMISSION FOR THIS PURPOSE, NOW OR SUBSEQUENTLY, TO OBTAIN, PREPARE, USE AND FURNISH INFORMATION CONCERNING MY CURRENT PERSONAL CHARACTERISTICS AND MODE OF LIVING, THROUGH CORRESPONDENCE OR PERSONAL INTERVIEWS WITH NEIGHBORS, FRIENDS, ASSOCIATES OR OTHERS WITH WHOM I AM</li> </ol>
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CERTIFICATES.  I AUTHORIZE AND EMPOWER THE LAKE COUNTY SHERIFF'S MERIT COMMISSION, ANY CONSUMER REPORTING AGENCY OR OTHER OUTSIDE SERVICE COMPANY ENGAGED BY THE MERIT COMMISSION FOR THIS PURPOSE, NOW OR SUBSEQUENTLY, TO OBTAIN, PREPARE, USE AND FURNISH INFORMATION CONCERNING MY CURRENT PERSONAL CHARACTERISTICS AND MODE OF LIVING, THROUGH CORRESPONDENCE OR PERSONAL INTERVIEWS WITH NEIGHBORS, FRIENDS, ASSOCIATES OR OTHERS WITH WHOM I AM
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6. I FURTHER AUTHORIZE ANY OF MY REFERENCES, EMPLOYERS OR SCHOOLS TO FURNISH INFORMATION REQUESTED BY THE LAKE COUNTY SHERIFF'S MERIT COMMISSION OR THE LAKE COUNTY SHERIFF'S OFFICE AND THEREBY RELEASE ALL SUCH INFORMATION ON RECORD TO THE LAKE COUNTY SHERIFF'S MERIT COMMISSION OR THE LAKE COUNTY SHERIFF'S OFFICE.
7. I AGREE THAT IF I PROVIDE FALSE INFORMAITON ON THIS APPLICATION, ANY CERTIFICATION OR EMPLOYMENT MAY BE WITHDRAWN OR TERMINATED.
Signature: Date:

# QUESTIONS OFTEN ASKED BY DEPUTY SHERIFF TRANSFER CANDIDATES

1) Since I am an experienced police officer, will I be given monetary compensation, benefits or special consideration for my training credentials, specialty skills or law enforcement time?

No. While all of these factors will make you an attractive candidate, to fill an open position as a deputy sheriff, no additional salary or benefit compensation is given to transfer applicants. Salary and benefits are the same as a new entry-level deputy sheriff.

2) Upon hire, how long is the probationary period?

12 Months

3) Will I have to participate in a Field Training Program?

Yes. Within the first 12 months of your employment you will be required to successfully complete an abbreviated Field Training Officer Program with the Highway Patrol Division generally six to nine weeks in length.

4) What will my work assignment be after I am hired?

After a one-week orientation to familiarize you with the many divisions of the Sheriff's Office you will be assigned to the Court Security Division, unless openings exist within the Highway Patrol Division. Assignments to the Highway Patrol are based on seniority and availability.

5) How long will I have to work in the Court Security Division before a position opens on the Highway Patrol?

Generally from 3 to 18 months.

6) How soon can I become a specialist?

Deputies may apply for any open specialty position (except C.I.D.) after they have completed their probationary period. Deputies wishing to apply for an open position within the Criminal Investigations Division (C.I.D.) must have at least three years of street experience.

7) When will I be eligible for a promotion to the rank of sergeant?

You must have four years of service as a deputy sheriff to be eligible to take a promotional examination. All promotional testing is conducted and governed by the Lake County Sheriff's Office Merit Commission.

8) Who conducts the background investigations for deputy sheriff transfer candidates?

While the Lake County Sheriff's Merit Commission is responsible for all deputy sheriff transfer candidate testing, command personnel from the Sheriff's Office complete all background checks and inquiries.

9) Is there a residency requirement for deputy sheriffs?

Deputy Sheriffs are allowed to live outside the boundaries of Lake County if they commute to work in their own vehicle. Deputies assigned take home squads for their assignments must live within Lake County.

10) Does the Sheriff's Office allow deputies to engage in secondary employment?

Yes. Secondary employment is allowed, however it must be approved through written request to the Undersheriff annually and in compliance with Lake County Sheriff's Office General Order 9.11, Secondary (outside part-time) Employment.